

DECLARATION AND POWER OF ATTORNEY
FOR UTILITY PATENT APPLICATION - SOLE

As the below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled **LOW RESIDUE ANHYDROUS ANTIPERSPIRANT STICK COMPOSITION** the specification of which is attached hereto.

I hereby state that I reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information that is material to the examination of this application in accordance with 37 Code of Federal Regulations 1.56.

I hereby appoint the following attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Irving M. Fishman, Registration No. 30,258

Address all telephone calls to Irving M. Fishman at telephone number (609) 497-7415.

Address all correspondence to:

Irving M. Fishman, Esquire
Church & Dwight Co., Inc.
469 North Harrison Street
Princeton, New Jersey 08543

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor:

THITIWAN BURANACHOKPAISAN

Inventor's signature: _____

Date: _____

Residence: 15 Madison Street, Morristown, NJ 07960

Citizenship: Thailand

Post Office Address: Same as above

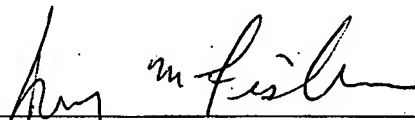
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- b. ☒ Please charge Deposit Account No. 03-1920 in the amount of \$896.00. A duplicate copy of this paper is enclosed.
9. ☐ A preliminary Amendment is enclosed.
- a. ☐ No additional fee is due.
- b. ☐ A check in the amount of \$_____ to cover the cost of additional claims is enclosed. See paragraph 10.a., below.
- c. ☐ Please charge our Deposit Account No. 03-1920 in the amount of \$_____. A duplicate copy of this paper is enclosed.
10. ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this application or with recording any Assignment concerning it, or to credit any overpayment, to Deposit Account No. 03-1920, unless otherwise paid by check.
- a. ☒ If our check is missing or otherwise insufficient, or if any additional fees are required, the Commissioner is authorized to charge (or credit any overpayment) to Deposit Account No. 03-1920.
- b. ☐ Any additional filing or other fees required under 37 CFR Section 1.16, including any fees for presentation of extra claims.
- c. ☐ Any patent application processing fees under 37 CFR Section 1.17.
- d. ☐ Any additional Assignment recording fees under 37 CFR Section 1.21(h).

Note: See 37 CFR § 1.311b regarding authorization to pay the issue fee from deposit account.

11. ☐ An Information Disclosure Statement is enclosed.

Respectfully submitted,

By 

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